

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101583,813

FILING DATE

06-22-06

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
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| TOTAL DEP. | 8 | ← | | ← | ← | ← |
| TOTAL CLAIMS | 9 | [REDACTED] | | [REDACTED] | [REDACTED] | [REDACTED] |

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
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| TOTAL DEP. | | ← | | ← | ← | ← |
| TOTAL CLAIMS | | [REDACTED] | | [REDACTED] | [REDACTED] | [REDACTED] |